

KREF 006/P KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601 (502) 573-2226 FAX (502) 573-5622		1. PAC Name:				3. This Statement Covers: From: _____ Month - Day - Year To: _____ Month - Day - Year					
		2. KY Registration Number: (Identification Number)									
ITEMIZED RECEIPTS SCHEDULE 1											
4. Name and Address from whom received. Receipts in excess of \$100 must be itemized. <i>ALL</i> contributions from other PACs, regardless of amount <i>must</i> be itemized.		5. Type of Contribution or other Receipt		6. Date of Receipt		AMOUNT <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">7a. Contribution by Check or Written Instrument</div> <div style="width: 45%;">7b. Other Receipts</div> </div>		8. Cumulative for Year (per contributor) (includes monetary and in-kind)		9. Occupation and Employer of Contributor. (If self-employed, name under which doing business.) Occupation shall be specific. <i>OR</i> Major Business, Social or Political Interest represented by PAC.	